Open house

Growth of home health care creates new opportunities

mericans spent more than \$40 billion on home health care in 2004, up from \$12 billion in 1990, according to the U.S.

Department of Labor's Bureau of Labor Statistics. That increase is attributed to early discharges from hospitals, more awareness of hospice eligibility and a shift from nursing facilities for the elderly to receiving care in their own home.

Whatever the reasons, the field is growing, and by 2012, the BLS projects a 56 percent increase in overall home health care services, offering new job opportunities to home health aides, nurses, physical, speech and occupational therapists and others.

"This field is not going to shrink," says Jane Gould, president and CEO of Visiting Nurse Regional Health Care System in New York. "It's going to be a very vital part of the health care industry and in general, in this country."

Perfect fit

What kinds of employees are home health care providers looking for?

"People who talk about the desire to take care of people, to help them to become independent, and who want to do more than just treat the wound," says Gould. "Someone who might want to know if Mrs. Jones' heat is on in the winter, and if it's not, find out if that's a signal that she cannot pay her heating bill and get her another form of assistance that we don't provide, but that is provided through a federal or state grant."

In the extensive interview process characteristic of this field, facilities also look for the ability to work independently and represent their employer in a professional manner.

Nisha Bhandari, director of rehab for Visiting Nurse
Regional Health Care System, has worked in home health care for 17 out of her 19 years as an occupational therapist. She says she begins to take mental notes from the very beginning of the interview process regarding responsiveness.

"We ask [applicants] to complete a sample assessment and fax it to us. If there is a delay, I would wonder about that person," she says, noting her organization's reimbursement depends on submitting documentation in a timely manner.

Getting experience

Although most home health care providers require one year of experience, many providers prefer to hire therapists with at

AVERAGE NATIONAL WAGES HOME HEALTH CARE

Occupation	Salary
Home health aide	\$18,200
LPNs	\$33,100
Occupational therapist	\$53,300
Physical therapist	\$58,700

Source: Bureau of Labor Statistics

least three years in the health care field.

So how does one gain the required experience out of grad school or a certification program?

Bhandari advises working first in a hospital, nursing care facility or cost center — in-patient rehab, out patient rehab or subacute care facility — before applying with a home health care agency. And she suggests employees seek an environment with minimal supervision by physicians and administration.

"We are looking for people who are comfortable in a relatively autonomous role," says Paul Dean, a human resource director for VistaCare, a hospice provider with 56 facilities in 14 states.

Built-in benefits

Bhandari and Gould say their therapists and nurses often opt for per-visit or per-diem pay rates rather than a full-time salary.

The independence the job

brings coupled with setting one's own hours is the ultimate draw for those avoiding the demands of hospitals.

"The greatest benefit is the flexibility," says Bhandari. "You can drop off your kids, go to a doctor's appointment, squeeze in a visit or two and go pick up your kids."

And employers boast that salaried employees do quite well financially.

"The majority of our nurses are making between \$80,000-\$100,000 a year," says Gould.

"The wages have to be competitive," says Larry Meigs, president and CEO of Visiting Angels, which is based in Haverton, Pa., and employs long-term home health-care providers for 250 locations throughout the country.

Most companies offer incentives such as signing bonuses, higher pay for specialties in the field and generous tuition reimbursement programs.

"We offer \$1,000 tuition reimbursement a year, with pay raises for hospice or palliative certifications," says Dean.

Beyond the basics

Not all jobs will be based on direct care. Other jobs, such as coding for insurance purposes, will be in demand, especially considering reimbursement for health care organizations which depend on the proper diagnosis and treatment codes.